certificatived

## 04410AN 653 NEVADA FINANCIAL DISCLOSURE STATEMENT

(Attach additional sheets if necessary.)

MAY 2 1 2004
DEAN HELLER
SECRETARY OF STATE

			Si	ECRETARY O	F STA	<b>NTE</b>
MAILING ADDRESS PO BOX 203 CITY, STATE, ZIP WELLINGTON, NV. 80 TELEPHONE 725 465 2944	LEN	GTH OF RESIDEN GTH OF RESIDEN E / Oyas.	ICE IN NEVADA	/Oyas. WHERE REGI	90	LONTHS
List all public offices for which this financial disclosur	re statement is	required [NRS 28	81.571, Subsection ANNUAL all elected and appointed public officers	1 1(g)]:  CANDIDATE  (no later than the 10th day after the last day	to fill un of an	DINTMENT lexpired term elected or nted public
Public Office	Annual Compensation	Term or Date Appointed	(no later than Jan. 15 each year) NRS 281.559(1)(b) 281.561(1)(b)	to qualify as a candidate)  NRS 281.561(1)(a)	(withi	officer n 30 days) NRS 1.559(1)(a)
SMITH VALLEY FIRE PROTECTION DIRECTOR	\$_N/A \$	N/A				
	\$	1				
List all general sources of income for you and memb				RS 281.571, S	ubsect Self	ion 1(b)]: Household Member
PUBLIC EMPLOYEES RETIREMEN		OF CALL	FORNIA		X	
Lyon Co. SCHOOL DIST. (SUA	STITUTE				$\mathbf{K}$	
LYON CO. SCHOOL DIST.						X
·				11 - 12		
·					Ш	Ш
List each creditor to whom you or a member of your or deed of trust on real property which is not required vehicle for personal use was retained by seller] [NRS	d to be listed be	low, and (2) de	ore [except (1) of bt for which a s	debt secured security inter	l by m est in	nortgage a motor
•					Self	Household Member
NONE						
			-74-119	-		
<del></del>						

firm, business, trust joint venture, syndic involved as a trustee, beneficiary of a trust a class of stock or security representing [NRS 281.571, Subsection 1(f)]:	st, director, officer, owne	er in whole or in part	, limited or general	partner, or	holder of
	N <i>F</i>			Self	Household Member
List specific location and particular use of your household has a legal or beneficial state or an adjacent state [NRS 281.571, Suspecific Location of the control of the co	interest; (2) the fair mark	ket value of which is	\$2,500 or more; ar	nd (3) locat	ed in this
List the identity of donor and value of eaduring the preceding taxable year [except consanguinity or affinity; and (2) ceremo occasion if the donor does not have a suit to 2015 774 Subscript 4(2).	ot (1) a gift received fror nial gifts received for a l	m a person who is r birthday, wedding, a	elated to you withir nniversary, holiday	n the third of or other ce	legree of remonial
[NRS 281.571, Subsection 1(e)]:	Donor O <u>F</u>			Value of \$\$	of Gift
THE INCORMATION I HAVE PROVIDE	NEDEN IS ACCUDA	TE AND COMPLET			
THE INFORMATION I HAVE PROVIDED	D REKEIN IS ACCURAT	I A A A -			
Date: 5-19-64	Signature:	Ju 01	agar	7.	